



HOUSE OF REPRESENTATIVES

HB 2355

opioid antagonists; prescription; dispensing; administration

Prime Sponsor: Representative Carter, LD 15

DPA Committee on Health

DPA Caucus and COW

X As Transmitted to the Governor

OVERVIEW

HB 2355 allows a pharmacist to dispense naloxone hydrochloride (Naloxone) without a prescription to a person at risk of experiencing an opioid-related overdose, a family member or community member in a position to assist that person. Allows a physician, licensed nurse practitioner or any other health professional who has prescribing authority to prescribe and dispense Naloxone to a person at risk, a family member in a position to assist a person at risk, a community organization that provides services to persons at risk or to any other person who is in a position to assist persons at risk.

PROVISIONS

1. Requires a school governing board to prescribe and enforce policies and procedures for the emergency administration of Naloxone or any other opioid antagonist approved by the United States Food and Drug Administration by any employee of a school district.
2. Permits a pharmacist to dispense Naloxone or any other opioid antagonist without a prescription to a person who is at risk of experiencing an opioid-related overdose, a family member who is in a position to assist that person or to a community member who is in a position to assist that person.
3. Requires a pharmacist who dispenses Naloxone or any other opioid antagonist to do the following:
 - a. Document the dispensing consistent with the Pharmacy Board rules; and
 - b. Instruct the individual to whom the opioid antagonist is dispensed to summon emergency services as soon as practicable either before or after administering the drug.
4. States that the authority of a pharmacist to fill or refill a prescription for Naloxone will not be affected.
5. Specifies that a pharmacist who dispenses an opioid antagonist is immune from professional liability and criminal prosecution for any decision, act, omission or injury that results if the pharmacist acts with reasonable care and in good faith, except in cases of wanton or wilful neglect.
6. Allows a licensed physician, nurse practitioner or any other health professional, who has prescribing authority and who is acting within their scope of practice, directly or by standing order, prescribe or dispense Naloxone to a person who is at risk of experiencing an opioid-related overdose, to a family member of that person, to a community organization that

provides services to persons who are at risk of an opioid-related overdose or to any other person who is in a position to assist a person who is at risk of experiencing an opioid-related overdose.

7. Mandates a physician, licensed nurse practitioner or other health professional who prescribes or dispenses Naloxone or any other opioid antagonist to instruct the individual to whom the opioid antagonist is dispensed, to summon emergency services as soon as practicable either before or after administering the opioid antagonist.
8. Specifies that a physician, licensed nurse practitioner or any other health professional who prescribes or dispenses an opioid antagonist will be immune from professional liability and criminal prosecution for any decision, act, omission or injury that results if the physician acts with reasonable care and in good faith, except in cases of gross negligence, wilful misconduct or intentional wrongdoing.
9. States that before a physician, licensed nurse practitioner or other health professional prescribes an opioid antagonist, they may require the person receiving the prescription, as an indicator of good faith, to provide factual basis in writing for a reasonable conclusion that the person or entity meets the description of a person or entity who is able to receive an opioid antagonist.
10. Allows a person to administer an opioid antagonist that is prescribed or dispensed by a physician, licensed nurse practitioner, pharmacist or other health professional to a person who is experiencing an opioid-related overdose.
11. Specifies that a person who administers an opioid antagonist in good faith and without compensation to a person who is experiencing an opioid-related overdose is not liable for any civil or other damages as the result of any act or omission by the person rendering care, or as the result of any act or failure to act to arrange for further medical treatment or care for the person experiencing the overdose, unless the person rendering the care acts with gross negligence, wilful misconduct or intentional wrongdoing.
12. Defines *person*, for the purposes of A.R.S. §36-2226 and A.R.S. §36-2267 as an employee of a school district or charter school who is acting in the person's official capacity.
13. Makes technical and conforming changes.

CURRENT LAW

A.R.S. §36-2228 states that an emergency medical care technician or peace officer who is trained in the administration of Naloxone or any other opiate antagonist that is approved by the United States Food and Drug administration and designated by the director of the Arizona Department of Health Services may administer to a person who they believe is suffering from an opiate-related drug overdose.

Licensed physicians, licensed nurse practitioners, emergency medical care technicians and peace officers who administer Naloxone or any other opiate antagonist are immune from professional liability and criminal prosecution for any decision made, act, omission or injury that results from that act if those persons act with reasonable care and in good faith, except in cases of wanton or willful neglect. The statute does not create a duty to act or a standard of care for peace officers to administer an opiate antagonist.

The director shall designate opiate antagonists that may be used based on an evaluation of the opiate antagonist's safety and efficacy.